

Statement of Elected/Appointed Officer

I do solemnly swear
(or affirm) that I have not directly or indirectly paid, offered, promised to pay,
contributed, or promised to contribute any money or thing of value, or promised any
public office or employment for the giving or withholding of a vote at the election at
which I was elected or as a reward to secure my appointment or confirmation, whichever
the case may be, so help me God.
the case may be, so help me dou.
$\alpha \alpha 1 1 1 \alpha$
Affianced Signature
Philip Huang, M.D.
Printed Name
Health Authority
Position to Which Elected/Appointed
Austin/Travis County
City and/or County
± **
SWORN TO and subscribed before me by affiant on this 4 day of 20 H.
Jan Dulle Alman Ellaran
JACQUELINE JOHNSON GARZA Signature of Person Authorized to Administer
Notery Public Oaths/Affidavits
My Comm. Sixp. Cot. 12, 2014
Jacqueline Johnson-Garza
Printed Name
Notary Public for the State of Texas
Title



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I Paul R. Hin	chey	do solemnly swear
(or affirm) that I have not di	rectly or indirectly paid, offered,	•
contributed, or promised to con-	tribute any money or thing of value	e, or promised any
	the giving or withholding of a vot	-
	ed to secure my appointment or confi	
the case may be, so help me God.	7	,
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	Affianced Signature	<u> </u>
	Paul R. Hinchey, M.D.	
	Printed Name	
	ARA A TT TAL A AL COM	
	Alternate Health Authority	
	Position to Which Elected/Appointed	
	Austin/Travis County	
	City and/or County	
	City and or Country	
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SWORN TO and subscribed before	me by affiant on this 12 day of 10	brury 2014.
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	Con the	• • •
	Signature of Person Authorized to Ad	minister
(Grad)	Oaths/Affidavits	
WILLIAM E COLL	Villiam E. Coll	
My Commission Expires	Printed Name	
January 17, 2018	A READOW I WHEN	
	Notary Public for the State of Texas	
	Title	



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IJose G. Cab	···	do solemnly swear
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which I was elected or as a rewar		
the case may be, so help me God.		
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	TA 1000 0000	M/ IMOH
	TRITIUM	MMH
	Affianced Signature	_
	7 Injuneou Signature	
	Jose G. Cabanas, M.D.	
	Printed Name	
	Alternate Health Author	ity
	Position to Which Elected/A	ppointed
	Austin/Travis County	
	City and/or County	
		_
SWODN TO and subscribed before	ma by affiant on this 1.2	day of Rebrusy 2014.
SWORN TO and subscribed before	e me by amant on this	1ay 01 1001 WAY 2011.
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	(le sal	
	Signature of Person Author	zed to Administer
	Oaths/Affidavits	
(Seal)	1 11	11
	William E. C	110
WILLIAM E COLL	Printed Name	10 TO 10 TABLES 200
My Commission Expires January 17, 2018		
January	Notary Public for the State	of Texas
11601	Title	



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Ballet sub of 1
Affianced Signature
Philip Huang, M.D.
Printed Name
Health Authority
Position to Which Elected/Appointed
Austin/Travis County
City and/or County
SWORN TO and subscribed before me by affiant on this 18 day of 2014.
Jan Warm & Barro
Signature of Person Authorized to Administer
JACODELINE JOHNSON CHINASH
Protein y 1 work 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
STATE OF TEXAS My Comin. Exp. Oct. 12, 2014 Jague Ne Donner - Garzy
Printed Name
_Notary Public for the State of Texas
Title